



APPLICATION FOR EMPLOYMENT

COLUMBIA COUNTY GOVERNMENT
HUMAN RESOURCES DEPARTMENT
630 RONALD REAGAN DRIVE
EVANS, GA 30809

JOB LINE (706) 312-WORK (9675)

Fax Number (706) 868-3301

Website address: www.co.columbia.ga.us

GENERAL INFORMATION

Evaluations of applications are based on individual merit. Information **MUST BE COMPLETE** so that all applications can be given equitable consideration. All qualified applicants will receive consideration for employment regardless of race, color, religion, sex, age, national origin or disability. Columbia County will hire only authorized workers, regardless of national origin.

Print, sign, and date your application in ink. Failure to submit a completed application by close of position posting date will disqualify the candidate for employment consideration. Resumes are not accepted in lieu of a completed application. Applications remain active for six months.

Position # _____ **Position Desired** _____ **Salary Requirement** _____

PERSONAL DATA

Name _____
First _____ **Middle Initial** _____ **Last Name** _____ **Social Security #** _____

Address _____
Street _____ **Apt. #** _____ **City** _____ **State** _____ **Zip Code** _____

Telephone numbers () _____ () _____ () _____
Area Code Area Code Area Code

Have you ever worked for Columbia County Government? ☐ Yes ☐ No

When & Where? _____

Will you accept: Temporary work? ☐ Yes ☐ No Part-time work? ☐ Yes ☐ No
Shift work? ☐ Yes ☐ No Week-end/Holiday? ☐ Yes ☐ No

Are you over 18 years of age? ☐ Yes ☐ No Are you a U.S. citizen? ☐ Yes ☐ No

Are you legally eligible to work in the U.S.? ☐ Yes ☐ No Date available to begin work? _____

NOTE: If offered employment you will be required to provide documentation to verify employment eligibility. Failure to provide the requested documentation may result in a determination that the applicant is ineligible for employment in the United States.

COLUMBIA COUNTY GOVERNMENT IS AN EQUAL OPPORTUNITY EMPLOYER
M/F/V/D

Do you have a valid Driver's License? ☐Yes ☐No License # _____ State _____

Do you have a valid Commercial Drivers License? ☐Yes ☐No What Classification? _____

NOTE: Possession of a valid drivers license is not an essential function of all employment offered by the County. Answering "No" to this question is not necessarily a bar to consideration for employment.

Have you received any traffic citations in the past 3 years? ☐Yes ☐No

Please indicate type of offense and dates _____

Have you (since the age of 18) ever been convicted of or plead guilty or no contest to a misdemeanor? ☐Yes ☐No

Have you (since the age of 18) ever been convicted of or plead guilty or no contest to a felony? ☐Yes ☐No

If YES, describe circumstances _____

NOTE: Any applicant convicted of any criminal offense involving the manufacture, distribution, trafficking, or sale of a controlled substance, dangerous drugs or marijuana, or convicted of any felony involving a violent crime such as assault with a deadly weapon, aggravated assault or murder are ineligible for employment with Columbia County. Such applicants shall be automatically rejected. Applicants convicted of any other felony will be considered on a case-by-case basis. Any applicant who has been convicted of any felony or misdemeanor and has received a pardon from the appropriate State Pardon/Parole Board shall be eligible for employment with the County.

Have you ever been suspended, dismissed or asked to resign from any job? ☐Yes ☐No

If YES, explain in detail _____

EDUCATION

HIGH SCHOOL

Name: _____

Location: _____

Check highest grade completed: 7 8 9 10 11 12

Graduated? ☐Yes ☐No

If not a high school graduate, do you have a GED? ☐Yes ☐No

COLLEGES/UNIVERSITIES						
NAME OF SCHOOL	CITY	STATE	HRS. EARNED QTR.	HRS. EARNED SEM.	MAJOR	DEGREE EARNED

Describe special vocational or business courses you have taken which relate to the job for which you are applying.

Special skills, qualifications, and certifications (including language skills, typing skills, and business equipment or machine operating skills) which relate to the job for which you are applying.

EMPLOYMENT HISTORY

Describe your work history **BEGINNING WITH YOUR CURRENT OR MOST RECENT JOB**. Failure to give complete information regarding each job held will result in your disqualification. Complete addresses with zip code and phone numbers for all employers are necessary. A resume may be attached only as additional information and will not be accepted in lieu of completing this section.

Name of Organization or Firm		Telephone ()		Dates Employed	
				From Mo/Yr To Mo/Yr	
Street City State Zip Code		May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Official Job Title		Name of Supervisor		Pay	
				Start End	
Describe Specific Job Duties					
Reason for Leaving					
Name of Organization or Firm		Telephone ()		Dates Employed	
				From Mo/Yr To Mo/Yr	
Street City State Zip Code		May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Official Job Title		Name of Supervisor		Pay	
				Start End	
Describe Specific Job Duties					
Reason for Leaving					
Name of Organization or Firm		Telephone ()		Dates Employed	
				From Mo/Yr To Mo/Yr	
Street City State Zip Code		May we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Official Job Title		Name of Supervisor		Pay	
				Start End	
Describe Specific Job Duties					
Reason for leaving					

List three (3) personal references. Do not list relatives or former employers.

Name	Address	Phone #	Years Known

List relatives employed with the County

Name	Address	Phone #	Years Known

Please use this space for additional information relevant to your education, training and experience.

AUTHORIZATION AND RELEASE

My signature on this application form attests to the fact that all information included is true to the best of my knowledge. I am aware that falsification on any part of this application form and attached resume or credentials may disqualify me for employment or result in immediate dismissal, regardless of when discovered. I understand that any employment pursuant to this application shall be subject to the condition that I pass the pre-employment drug screening urinalysis test and that information regarding use of drugs may be disclosed to the appropriate county representative as a part of the employment process. I further understand that a post-offer of employment physical examination is also required for certain positions, and in those cases, employment is conditional upon successfully passing the physical examination. All medical information will be classified as confidential.

Furthermore, I hereby authorize Columbia County, its agent or representative to contact any person or entity named on my application and any attached resume or credentials for employment for the purpose of confirming the information contained therein and/or obtaining other information which may be material to my qualifications for employment. I also hereby release Columbia County, its agent or representative, and any person or entity providing information pursuant to this Authorization and Release of information, from all liability based upon the provision of that information.

TERMS OF EMPLOYMENT

Any employee will be subject to the Personnel Policies and Procedures Manual. I understand that if an offer of employment is extended to me by Columbia County, I will be provided, upon request, a copy of the Personnel Policies and Procedures Manual and will be given the opportunity to ask questions. While I am employed by Columbia County, I will agree to abide by the Personnel Policies and Procedures Manual, rules and regulations of Columbia County, now in force or that may be enacted while employed by Columbia County, and to discharge all duties to the best of my ability. I will be free to terminate employment at any time, with or without cause, unless such termination is controlled by a written contract of employment providing differently.

DATE: _____ SIGNATURE _____

Resumes, letters of reference, etc. submitted with the Application for Employment become property of Columbia County and cannot be returned. The information you have provided on the application is subject to public disclosure under the Georgia Open Records Act.

APPLICANT DATA SHEET

Dear Applicant:

We are an equal opportunity employer. Qualified applicants are considered for employment without regard to race, color, religion, national origin, sex, age, disability, or veteran status.

To help us comply with federal equal opportunity record keeping requirements, please answer the questions on this survey. In addition, the information will assist us in ensuring that our recruitment efforts are reaching all areas in the community and that all protected classes are represented in our applicant population.

This data is for periodic government reporting and will be kept in a *confidential file* separate from the Application for Employment.

NAME (OPTIONAL)

DATE OF APPLICATION

TITLE OF POSITION FOR WHICH YOU ARE APPLYING

Confidential Information

Please indicate appropriate sex and ethnic background category

- ☐ MALE ☐ CAUCASIAN ☐ HISPANIC
- ☐ FEMALE ☐ AFRICAN AMERICAN ☐ ASIAN/PACIFIC ISLANDER
- ☐ NATIVE AMERICAN/AMERICAN INDIAN
- ☐ OTHER _____

Notice to Applicants

All applicants are entitled under the law to equal employment opportunity. If you believe you have been discriminated against in employment on the basis of race, color, religion, national origin, sex, age, disability, or veteran status, you are entitled to notify the *Equal Opportunity Commission, 2401 E Street N.W., Washington, D.C. 20506* or other appropriate agencies.